|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  |  | Date |  |
|  |  |  |  |  |  |
| **Note:** | This form must be submitted at least two days prior to requested absence for all but emergency (sick, funeral, etc.) leave. |
|  |  |  |  |  |  |
| I am requesting time off from |  | to | ***.*** |
|  |  |  |  |  |  |
| If this request is approved, I will be using the following type of leave: |
|  | [ ] Flex Time |  | [ ] Sick Leave |
|  | [ ] Funeral Leave |  | [ ] Unpaid Time Off |
|  | [ ] Jury Duty Leave |  | [ ] Vacation |
|  |  |  |  |  |  |
| I am to be paid |  | hours as leave, and  |  | hours as holiday (if a  |
| holiday is included in this scheduled time). |
|  |  |  |  |  |  |
| Notes: |  |
|  |  |
|  |  |
|  |  |  |  |  |  |
| I understand and agree to the following: |
| * This request is not approved until it has been electronically signed by me, the sales and customer service manager, and the vice president of sales and marketing.
 |
| * Requests for leave will only be approved when doing so will not negatively impact the company’s business operations and will not conflict with other team members’ previously approved leave.
 |
| * If my request is approved, I will receive my paycheck for this pay period on the normal payday unless other arrangements are detailed in the above notes section.
 |
| * When I take time off from my regular work schedule, prior to the start of leave I am required to: (1) update my voice mail greeting, (2) set email automatic replies, and (3) send an email to all Oregon Door team members informing them of my upcoming leave.
 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |
|  |  | Team Member Signature | Date |
|  |  |  |  |
|  |  | Sales & Customer Service Manager Signature | Date |
|  |  |  |  |
|  |  | Vice President/Sales & Marketing Signature | Date |